

STATE OF INDIANA
APPLICATION FOR MARRIAGE LICENSE

No. 88-591⁵⁹¹

File 10-7-87
Date of Application

FLOYD County

MALE
Medical Examination Report L
Name of Physician _____

FEMALE
Medical Examination Report Dated 11-9-87
Name of Physician Arthur Boerner

ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".

MALE APPLICANT
Name Gary V. Rogge
Date of Birth 6/13/1959
Place of Birth (State or foreign country) Flad Co Ind.
Residence Address Rt #1 Flad Co Ind.
Previous Marital Status: Never Married ☒ OR
Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐
Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree
☐ Other (Specify) Dr license
1. Are you now or have you ever been adjudged to be of unsound mind? No ☒ Yes ☐
If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☒ Yes ☐
3. Are you related to the female applicant closer than second cousin? No ☒ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
6. List the full names of any dependent children.

7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Bernard C. Rogge
Residence of father (if deceased so state) deceased
Birthplace of father (State or foreign country) Flad Co Ind.
9. Full maiden name of mother Margaret E. Hensley
Residence of mother (if deceased so state) New Albany Ind.
Birthplace of mother (State or foreign country) New Albany Ind.
State of Indiana, } ss: I depose and state the information given in this application is true and correct.
County of Flad
Signed Gary V. Rogge
New Address _____
Subscribed and sworn to before me this October day of 1987
William B. Jenks Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, } ss:
County of _____
Signed _____ Father
Signed _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19____

Clerk

FEMALE APPLICANT
Name Trudi Louise Hampton
Date of Birth 6/16/1965
Place of Birth (State or foreign country) Stutgard Germany
Residence Address 1407 Marlow Dr. Carswell Ind.
Previous Marital Status: Never Married ☒ OR
Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐
Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree
☐ Other (Specify) Dr license
1. Are you now or have you ever been adjudged to be of unsound mind? No ☒ Yes ☐
If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☒ Yes ☐
3. Are you related to the male applicant closer than second cousin? No ☒ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
6. List the full names of any dependent children.
Brandi Nicole Hampton

7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Cortez Joseph Hampton
Residence of father (if deceased so state) New Albany Ind.
Birthplace of father (State or foreign country) New Albany Ind.
9. Full maiden name of mother Eugene E. Eubank
Residence of mother (if deceased so state) New Albany Ind.
Birthplace of mother (State or foreign country) New Albany Ind.
State of Indiana, } ss: I depose and state the information given in this application is true and correct.
County of Flad
Signed Trudi Hampton
New Address _____
Subscribed and sworn to before me this October day of 1987
William B. Jenks Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, } ss:
County of _____
Signed _____ Father
Signed _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19____

Clerk

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the _____ County _____ Court by written order issued _____ and filed in _____ authorizes and directs the issuance of a marriage license to the above named parties.

RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE

Be It Remembered, there was filed in my office a marriage license issued by the clerk of the FLOYD Circuit Court of Indiana dated the 10 day of NOVEMBER, 1987, authorizing the joining together as husband and wife GARY V. ROGGE and TRUDI L. HAMPTON.
Be it further remembered, the following marriage certificate was filed in my office, to-wit:
I, ROBERT T. HUBLAR hereby certify that on the 23 day of NOVEMBER, one thousand nine hundred and EIGHTY SEVEN at NEW ALBANY, County of FLOYD, State of Indiana, Groom GARY V. ROGGE of FLOYD County, State of INDIANA and, Bride TRUDI L. HAMPTON of FLOYD County, State of INDIANA were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of FLOYD County.
Dated this 23 day of NOVEMBER, 1987.

Signed ROBERT T. HUBLAR
Official Designation JUDGE FLOYD COUNTY COURT
Filed and recorded in accordance with the laws of the State of Indiana this 23 day of NOV, 1987.
Signed WILLIAM B. JENKS Clerk
FLOYD Circuit Court